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Chronic inducible urticaria; clinical evolution, remission definition, and stepping-down pharmacotherapy. WAO Position Statement.

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We use this protocol and it's working

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Abstract

BACKGROUND: Recently, the World Allergy Organization (WAO) urticaria committee published a position statement for the gradual withdrawal of therapies in Chronic Spontaneous Urticaria (CSU) and the definition of the concept of remission. Whether this positioning is applicable to different types of chronic inducible urticarias (CIndU) as well is unknown.

OBJECTIVE: To study the clinical evolution of CIndU and generate a consensus for CIndU focused on remission and treatment withdrawal in this particular condition.

METHODS: The WAO urticaria committee systematically reviewed current available longitudinal articles in CIndU. Based on this review, a proposal was made for "CIndU remission" definition based on the probability of recurrence after discontinuation of pharmacotherapy. Additionally, a scheme was constructed for when and how therapeutic de-escalation should be done.

Guidelines

PRISMA guideline will be conducted for the results of this protocol.

Chronic inducible urticaria; clinical evolution, remission definition, and stepping-down pharmacotherapy. WAO Position Statement.

1 PRINCIPAL QUESTION: What is the clinical evolution of CIndU after discontinuation of drug treatment?

2 METHODOLOGY:

Selection criteria

Eligibility criteria: We will include studies that met the following inclusion criteria:

- Publications
 - reporting longitudinal research in cohort (historic or concurrent), case-control, and randomized or non-randomized clinical trials, with follow-up for at least one year of clinical evolution of any CIndU.
- Conducted in humans.
- Published in any language.
- Available in full text.

Exclusion criteria: Publications with secondary data such as systematic reviews or meta-analyses, or those without clarity regarding the type of CIndU being evaluated will be excluded, as well as reports.

Information

sources and search strategy

We will conduct a systematic review from January 1966 to November 2025 with the primary objective of identifying studies focusing on relapse rates after CIndU.

The search will be performed using MeSH and free terms (Table 1). Considering that we did not evaluate a particular intervention (e.g., antihistamines, omalizumab, etc.), but rather the clinical evolution independent of the type of pharmacotherapy received, we considered that a PCC (Population, Concept, Context) framework was more appropriate than the PICO (Patient/Intervention/Comparison/Outcome) framework typically used for more focused systematic reviews (11). The search strategy was supplemented with field identifiers, truncators, proximity operators, and Boolean operators. The relapse rate indicates how many patients who were symptom-free, presented symptoms again. This will be used as the principal parameter to define a sustained clinical remission over time.

Two independent reviewers will screen the studies. Duplicates will be eliminated based on title and abstract. Subsequently, a full-text review of the articles will be conducted to apply the exclusion criteria (Figure 1).

Additionally, we will attempt to contact the authors of articles where the relapse rate is not available, relapse rate could not be calculated from the Kaplan-Meyer curves, or where we could not obtain the full article.

Data charting process and synthesis of results

To provide an overview of the findings concerning the review's objectives, the included data extraction will be tabulate and carefully evaluated to construct a narrative summary of the evidence. Each CIndU type will be evaluated separately, when possible.